## FOR INSTRUCTIONS, SEE BACK OF FORM

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>10</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

## **DISCLOSURE SUMMARY PAGE**

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

electronically. Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically.

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	Reset Form		
COMMITTEE NAME (Must be same as on Statement of Or	ganization)	7 _	- KOST
Committee To Elect Scott Belt		11	FORM '
IMPORTANT: Indicate by # type of committee you are reporting for (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Can Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	(2)State PAC (3)State Party ididate (7)School Board or Other Political	, E	DR-2 Rev. 12/2009) DISCLOSURE REPORT  OF Office Use Only  Sorror. # 1/2/0/3
CANDIDATE COMMITTEES ONLY: Candidate Name Scott A. Belt	Political Party (if applicable)	s	canned S ( )
Office Sought Pottawattamie Board of Supervisors	District (if Senate or House)	1 1	udited
Late reports are subject to possible civil and criminal penalties. P candidate's committee, and the chairperson, for any other type of	ursuant to lowa Code sections 68B.32A(7) committee, is the individual responsible for	end 68 or filing t	A.401(3), the candidate, for a imely and accurate reports.
SIGNATURE OF PERSON FILING REPORT	712 322 7779 TELEPHONE	_	DATE SIGNED
I AM FILING A January 19, 2011	REPORT FOR (1) ELECTION (	21NON-	ELECTION YFAR
(report date)	Indicate by #		
CHECK IF AMENDMENT TO REPORT DATED			
			mittees, enter Date of Election
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file	of Dissolution Form DR-3.	ounty & L	er 2, 2010 Local Committees, enter County in Non is held tarnic
STATEMENT OF CASH ON HAN	ID .		
CASH ON HAND at the beginning of the reporting period. (T committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	cash on hand at the end	\$	2685.43
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule A: Cash Contributions total A: Cash Contributions total (Attach Schedule A: Cash Contributions total A: Cash Contributions total (Attach Schedule A: Cash Contributions total A: Cash Contributions total A: Cash Contributions total (Attach Contributions total A: Cash Contributions total	dule A) (*also see in-kind below)	1461441	747.01
Schedule F: Loans Received total (Attach Schedule			0
Schedule H: Total Sales of Campaign Property (Atl	ach Schedule H)	*****	0
(Schedule H applies to Candidates' Com	mittees Oniv		
	SUB-TOTAL	\$	3432.44
SUBTRACT TOTAL MONEY SPENT THIS PERIO	D		
Schedule B: Expenditures total (Attach Schedule B	) (**also see debts and loans below)	******	3432.44
Schedule F: Loan Repayments total (Attach Sched	ule F)		0
CASH ON HAND at the end of this reporting period (if final re	part balance must be zero)	\$	0
"UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche			0
OUTSTANDING LOANS (From Schedule F - Attach Sched		-	0
CONSULTANT BREAKDOWN (Schedule G Attached?)	-		YES V NO
CANDIDATE COMMITTEES ONLY:		***	#* = * * * *****
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Att	ach Schedule H)	\$	0
STATE COMMITTEES: Submit a reconciled campaign accor	unt bank statement in January of each y	ear.	

For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF NDING FORM
Committee To Elect Scott Belt			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND
(MMDD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
	ID#	Jeff Fox 535 W. Broadway Suite 100		s	
10/15/10	CK#	CB, lowa 51503		\$100.00	
	ID#	Jody R. Edwards			
10.17/10	CK#	21276 McPherson Ave. CB, Iowa 51503		\$100.00	<u></u>
· · · · · · · · · · · · · · · · · · ·	ID#	Mitchel N. Lanc			
9/21/10	CK#	21678 Greenview Rd. CB, Iowa 51503		150,00	
	1D#	Robert Belt		,	
10/21/10	CK#	403 So. 28th Street CB, Iowa 51501		222.01	<u> </u>
•	ID#	A. Ason Okoruwa			
10/2/10	CK#	23278 Sunshine Lane CB, Iowa 51503		25,00	L
	ID#	J. Douglas Goodman			
10/1/10	CK#	17341 Turnberry Ridge CB, Iowa 51503		50.00	L
	ID#	Douglas P. Drummey			
10/23/10	CK#	1511 Oran Circle CB, Iowa 51503		100.00	<u>                                    </u>
	ID#				
	CK#				L
	ID#				
	CK#				<b>L</b> _
	ID#				<u> </u>
	CK#				<b></b>
			\$UB-TOTAL	\$	
		TOTAL (if last ps	ge of this schedule)	\$ 747.01	

<sup>4</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of \_\_\_\_\_\_(for Schedule A)

\$ 747.01

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset	Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

Reset Form	SCHEDULE
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E	3
(Rev.	07/03)

MONETARY EXPENDITURES

**CHECK THIS BOX IF AMENDING FORM** 

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Scott Relt

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
0/25/10	ID# CK#	Appreciated Advertising 2812 So. 74th Street Omaha, NE 68124	Yard Signs	\$ <sub>3074.23</sub>
2/14/10	ID# CK#	Daily Nonpared 500 West Broadway Suite 100 CB, Iowa 51503	Thank You Ad	258.21
2/23/10	ID# CK#	Salvation Army 715 North 16th Street CB, Iowa 51502	Christmas Donation	50.00
2/23/10	ID# CK#	c/o Nonpareil 500 West Broadway Suite 100 CB, Iowa 51503	Christmas Donation	50.00
	ID#			
	ID# CK#			
	ID#			
	CK#			
	ID# CK#			
			SUB-TOTAL	\$
		•	TOTAL (if last page of this schedule)	\$ 3432.44

THIS BO	X APPLIES T	O CANDIDATES' COMMIT	TEES ONLY

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

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(for Schedule B)